## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

**10**/ *594 038* 

|   | · · · · · · · · · · · · · · · · · · ·          | CLAIMS A                                  |  | SMALL ENTITY TYPE |                              | OR                            | OTHER THAN<br>OR SMALL ENTITY |                     |                        |      |                            |                        |
|---|--|---|--|-------------------|------------------------------|-------------------------------|-------------------------------|---------------------|------------------------|------|----------------------------|------------------------|
| U.S.  | NATIONAL S                                     | (Column                                   | ·/   |                   | Column 2)                    | Г                             | RATE                          | FEE                 |                        | RATE | FEÉ                        |                        |
| BAS   | IC FEE   |   | SMALL ENT. = \$ 150  |                   | LARG                         | E ENT. = \$ 300               | 8                             | ASIC FEE            | \$150                  | OR.  | BASIC FEE                  | \$300                  |
| EXA   | MINATION F                                     | EE  | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                  |                   |                              | er situations = 100 / \$ 200  | E                             | XAM. FEE            |                        |      | EXAM. FEE                  | 200                    |
| SEA   | RCH FEE  |   | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$200 / \$400 |                   |                              | her situations = 250 / \$ 500 | s                             | EARCH FEE           |                        |      | SEARCH FEE                 | 400                    |
| FEE   | FOR EXTRA                                      | SPEC, PGS.                                | minus 100 =  |                   |                              | / 50 =                        |                               | X \$ 125 =          |                        |      | X \$ 250 =                 |                        |
| тот   | AL CHARGE                                      | ABLE CLAIMS                               | 3 / minus 20 =   |                   | *                            | 11                            |                               | X \$ 25 =           |                        | OR   | X \$ 50 =                  | 550                    |
| INDI  | EPENDENT C                                     | LAIMS                                     | 6 minus 3 =  |                   | *                            | 3                             |                               | X \$ 100 =          |                        | OR   | X \$ 200 =                 | 600                    |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |  |                   |                              |                               |                               | + \$ 180 =          | •                      | OR   | + \$ 360 =                 | .—                     |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |  |                   |                              |                               |                               | TOTAL               |                        | OR   | TOTAL                      | 2050                   |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |  |   |  |                   |                              |                               |                               | SMALL ENTITY        |                        | OR   | OTHER THAN<br>SMALL ENTITY |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  |                   | BER<br>OUSLY                 | PRESENT<br>EXTRA              |                               | RATE                | ADDI-<br>TIONAL<br>FEE | ٠.   | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus  | **                |                              | =                             |                               | X \$ 25 =           |                        | OR   | X \$ 50 =                  |                        |
|   | Independent                                    | *   | Minus  | ***               |                              | =                             | Į Į                           | X \$ 100 =          |                        | OR   | X \$ 200 =                 | `                      |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                   |                              |                               |                               | + \$ 180 =          |                        | OR   | + \$ 360 =                 |                        |
|   |  | (Column 1)                                |  | (Colu             | mn 2)                        | (Column 3)                    |                               | TOTAL ADDIT.<br>FEE |                        | OR   | TOTAL ADDIT                |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | NUM<br>PREVI      | IEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA              |                               | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus  | **                | ÷                            | =                             |                               | X \$ 25 =           |                        | OR   | X \$ 50 =                  |                        |
|   | Independent                                    | *   | Minus  | ***               | _                            | =                             |                               | X \$ 100 =          | ,                      | OR   | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                   |                              |                               |                               | + \$ 180 =          |                        | OR:  | + \$ 360 =                 |                        |
|   |  |   |  |                   |                              |                               | -                             | TOTAL ADDIT.<br>FEE |                        | OR   | TOTAL ADDIT.               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |  |                   |                              |                               |                               |                     |                        |      |                            |                        |